SENDER: COMPLETE THIS SECTION COMPLETE THIS SECTION ON DELIVERY A. Signature Complete items 1, 2, and 3. Also complete ☐ Agent item 4 if Restricted Delivery is desired. Print your name and address on the reverse Addressee so that we can return the card to you. B. Received by (Printed Name) C. Date of Delivery Attach this card to the back of the mailpiece, or on the front if space permits. D. Is delivery address different from item 1? 1. Article Addressed to: If YES, enter delivery address below: LARRY HOGINS DELIVERY KOSIARA ROAD GAYLORD, MI 49735-939 3. Service Type Certified Mail ☐ Express Mail □ Registered ☐ Return Receipt for Merchandise ☐ Insured Mail ☐ C.O.D. Yes Yes Restricted Delivery? (Extra Fee)

Article Number
(Transfer from service label)

EXHIBIT A Affida Vit Of Service 2796

UNITED STATES POSTAL SERVICE



First-Class Mail Postage & Fees Pald USPS Permit No. G-10

Sender: Please print your name, address, and ZIP+4 in this box

STEELE SCHNENDER 428 FORBES AVE, STE 900 PATSBURGH, PA 15219

EXHIBIT A-Affidavit of Service